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Tobacco demand reduction strategy:
year one review and update



Tobacco Demand Reduction Strategy: Year One Review and Update

As part of its comprehensive attack on the contraband tobacco trade, the government unveiled its National Action Plan to Combat Smuggling in Canada in February 1994. The four-part plan includes measures to reduce smoking, known as the Tobacco Demand Reduction Strategy (TDRS).

The strategy, now entering Year Two of its three-year mandate, is funded by a health promotion surtax (estimated at \$60 million annually) on tobacco manufacturing profits. The close cooperation with provincial/territorial governments, health organizations and concerned individuals in measures to reduce tobacco use is being reinforced by the federal government's anti-tobacco efforts.

The TDRS combines three targeted activities – legislation, research and public education. It will continue to be implemented, in consultation with the provinces and territories and with Canada's health community.

Legislation

Existing restraints on the marketing and sale of tobacco products have been strengthened under the TDRS. The strategy has also introduced important new controls to limit the accessibility of tobacco products which is one of the best ways to prevent young people from becoming addicted:

- The *Tobacco Sales to Young Persons Act* took effect on February 8, 1994. The Act raises the minimum age of persons to whom the tobacco products can legally be sold from 16 to 18 years, increases fines for illegal sales to young persons (maximum of \$1,000 for a first offence), requires vendors to display signs indicating that sales to persons below legal age are prohibited, and restricts vending machines to bars, taverns and similar locations.

Health Canada sent information packages to retailers and vending machine owners and operators to ensure awareness of the law. These contained a copy of the regulations and a public notice. The toll-free 1-800 line which was put into place responded to 6,108 enquiries about the new legislation.

- Health Canada is encouraging voluntary compliance. Approximately 40 inspectors have been hired and are dedicated to enforcing tobacco legislation. They also investigate public complaints about sales to minors.

- Health Canada is working with the provinces and territories to develop cooperative enforcement agreements. Under these agreements, resources will be transferred to the provinces enabling provincial inspectors to enforce both federal and provincial legislation at the retail level. This will avoid duplication and overlap of services and confusion among the retailers.
- On November 24, 1994, Bill C-11 received Royal Assent. Packages containing less than 20 cigarettes are now prohibited.
- Health Canada continues to enforce the *Tobacco Products Control Act*. This Act prohibits advertising and regulates the promotion, labelling and monitoring of tobacco products.

Research

Research activities are designed to increase understanding of current smoking behaviours and of the factors that influence smoking:

- In collaboration with Statistics Canada, Health Canada introduced the Survey on Smoking in Canada in April 1994. This survey, which consists of four data collection cycles, measures the levels and changes in cigarette smoking behaviour over the 1994-95 fiscal year. The results for the first two cycles were released on August 18 and November 23, 1994 respectively.
- Health Canada has begun a study, in consultation with the provinces and territories, which examines the role of tobacco packaging (including generic packaging) and its impact on consumers, particularly youth, from a marketing perspective. The results will be available in March 1995.
- Health Canada is conducting research to examine the nicotine content of tobacco. The findings will help determine if and how nicotine is being added to cigarettes. The results will be available in March 1995.
- Research has also been initiated in such as areas youth smoking habits, women's smoking behaviours and cessation counselling by physicians.
- An international component will provide Canadian expertise to help develop multilateral strategies for tobacco control around the world.
- Through the National Health Research Development Program (NHRDP), Health Canada will fund research to assess the effectiveness of tobacco awareness and cessation programs aimed at smoking reduction among high risk populations in Canada.

Public Education and Awareness Programs

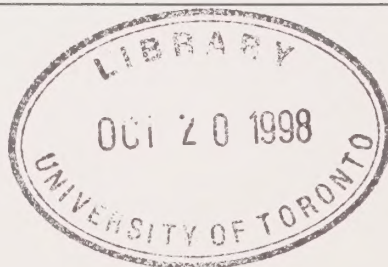
A comprehensive public education and awareness campaign has been developed as a result of consultations with the provinces and territories and with non-governmental organizations. These activities will complement the legislative and research components of the TDRS. The campaign includes:

- a multi-media campaign, commencing in January 1995, aimed primarily at raising awareness about the effects of second hand smoke and the toxic constituents of cigarettes;
- community action initiatives to support tobacco prevention and control at a local level;
- targeted efforts to reach priority groups distinguished by sex, age (i.e. youth), ethnicity and culture, income, literacy and addiction levels;
- initiatives to reach high-risk women, including those who are pregnant, living on a low income, teenagers, Aboriginal and new or single mothers;
- targeted efforts and initiatives to reduce the number of Canadians exposed to environmental tobacco smoke (ETS); and
- information dissemination to health professionals working in the area of tobacco control.



Summary of Initiatives and Costs

Initiatives	Projected Expenditures 1994-1995 (\$millions)
Legislation/Enforcement	3.20
Tobacco Sales to Minors: New Legislation	
Tobacco Legislation Enforcement	
Access to Information	1.30
National Clearinghouse on Tobacco and Health	
Public Education and Awareness Programs	12.91
School Education Programs	
Women and Tobacco Initiative	
Pre- and Postnatal Tobacco Initiative	
Priority Groups	
Environmental Tobacco Smoke and Family Resources	
Community Action Initiatives	
Message Promotion	8.14
Public Awareness and Information Campaign	
Research	3.52
Youth Smoking Survey	
Survey on Smoking in Canada	
Survey of Health Professionals	
Survey of Knowledge, Attitudes and Practices re ETS	
Anti-Tobacco Strategies for At-Risk Populations	
National Survey of Smoking Policies	
Impact of Current Rollback of Tobacco Taxes	
Lung Cancer and Environmental Tobacco Smoke (ETS)	
Infants' and Children's Exposure to ETS	
Determination of Nicotine Content of Tobacco	
Update of Tobacco-related Health Impacts Using Canadian Data	
Constituents and Standards	
Consensus Workshops	
Generic packaging	
International Programs	0.65
Evaluation and Coordination	3.27
Evaluation Component	
Coordination and Support	
Total	32.99



Legislation/Enforcement

1. Tobacco Sales to Minors: New Legislation

Background:

The Survey on Smoking in Canada (second cycle results were released in November 1994) showed that, of the young men aged 15-19 who smoke, 31% began to smoke before age 13 and 85% began to smoke before age 16. Almost all began before age 18. Of the young women age 15-19 who smoke, 26% began smoking before age 13, 83% before age 16 and almost all before age 18. As well, under-aged smokers buy up to 70% of their cigarettes directly from retailers.

Prohibiting the sale of tobacco to youth may be just one part the TDRS, but it is an important part. Surveys show that most smokers become addicted in their teens. Keeping cigarettes out of the hands of young people is one of the best ways to keep them from becoming addicted and helping them to quit. The legislative action will complement the public education and awareness programs also included in the TDRS.

Actions:

- The *Tobacco Sales to Young Persons Act*, an instrument to further dissuade children and young teens from becoming smokers, became law in February 1994. This Act replaces the outdated *Tobacco Restraint Act*.

The Act, for which the Minister of Health is responsible, raises the legal age of purchase from 16 to 18 years, restricts the location of tobacco vending machines to premises such as bars, taverns or other similar beverage rooms where minors do not normally have access, and increases the penalties for selling tobacco to minors from a maximum of \$100 to a new maximum of \$50,000 for repeated offenses.

It also bans packages containing less than 20 cigarettes per package since Bill C-11 received Royal Assent on November 24, 1994.

- Many provinces are also contributing to the National Strategy to Reduce Tobacco Use by initiating measures and passing legislation designed to significantly reduce tobacco consumption by young people. Often, these statutes go beyond the minimum standards set by the federal legislation.

2. Tobacco Legislation Enforcement

Background:

Health Canada is implementing an expanded enforcement program for the *Tobacco Sales to Young Persons Act* (TSYPA) and the *Tobacco Products Control Act* (TPCA). Approximately 40 new inspectors have been hired to enforce the legislation and investigate public complaints about sales to minors. Cooperative agreements are being discussed with provincial ministries, law enforcement agencies and other organizations interested in this area, in order to complement federal enforcement activities while reducing duplication and overlap. The enforcement component of the Tobacco Demand Reduction Strategy includes a retailer survey, to provide information on retailer awareness of the legislation. It will be conducted in collaboration with the provinces and territories.

Actions:

Progress to Date

- Existing food and drug inspectors have been designated to enforce TSYPA and TPCA.
- Close to 40 additional inspectors have been hired.
- The enforcement strategy for the TSYPA is being implemented in a staged approach. The retail trade has been informed of its obligations under the Act and Regulations.
- Contacts have been made with provinces and territories regarding the development of cooperative enforcement agreements.
- Business associations and retailer chains are being contacted to encourage compliance.
- Inspectors are visiting retailers to verify compliance.
- A national mail survey will be conducted in the winter of 1995 to ascertain retailers awareness of their responsibilities under tobacco sales to minors legislation. A federal-provincial-territorial working group has been established to oversee the survey.
- The survey will be repeated in each of the next two years with the first year's results acting as a baseline.

Public Education and Awareness Programs

The TDRS includes public education initiatives aimed at segments of the population which have been less responsive to previous efforts. Highly targeted services and programs focus on preventing smoking, encouraging and helping those who wish to quit smoking to do so, and reducing the harmful effects of tobacco smoke on non-smokers, especially infants and children. These services and programs will be implemented with the provinces and territories and in consultation with Canada's health community. Public awareness campaigns and support for community action initiatives will complement these targeted services and programs.

The National Clearinghouse on Tobacco and Health, which is supported by the provincial, territorial and federal governments, as well as non-governmental health organizations, maintains an extensive collection of materials and provides customized information to health professionals, researchers and all levels of government. Through the TDRS, the Clearinghouse will receive \$4.3 million from Health Canada until 1997 to expand its current mandate and to develop and deliver comprehensive client services.

1. School Education Programs

Background:

The results of the first cycle of the Survey on Smoking in Canada (August 1994) indicated that nearly all first use of tobacco occurs before high-school graduation. This suggests that, if adolescents can be kept tobacco-free, many will never start using tobacco. Because of its addictive nature, there is a strong need for prevention education through comprehensive school-based programs.

These programs pay particular attention to the reasons why young people smoke and are appropriate to age and grade level. The programs include features such as promoting healthy lifestyles, enhancing media literacy, increasing parental awareness and involvement, and establishing school smoking policies and peer counselling programs.

Actions:

To raise awareness of tobacco among children aged three to five and their care providers, an evaluation is being undertaken of "Smoke-Free", an existing

pre-school prevention program, developed with the Canadian Cancer Society. Consultations may lead to changes to the program materials and recommendations to expand delivery sites, such as to home day cares.

For grades six through nine, an Intermediate Smoking Prevention Resource and Training Package is being developed to meet the needs of Aboriginal students, students with motivational problems, students with low literacy levels and those learning English or French as a second language. These resources to support current curriculum will be developed in an innovative CD-ROM format geared to interest young people.

A literature review and consultations are underway to identify the needs of high-school students. The literature review will describe the major issues and trends in tobacco use prevention among in-school youth. In the fall of 1994 interviews were held with health and education specialists across the country to identify high school tobacco prevention programs and to understand the knowledge, policy and program gaps which may need to be considered in the development of a High School Action Plan.

A tobacco theme is being developed for use with MOGA (Most Outrageous Group Activity) Madness. This physical education activity is currently distributed to high schools through Canadian Association for Health, Physical Education, Recreation and Dance.

As education is a provincial matter, consultations are on-going with provincial education colleagues as to how to integrate these resources within the individual curriculum framework.

2. Women and Tobacco Initiative

Background:

Smoking is the leading cause of death of Canadian women. More than 15,000 women die each year in Canada as a result of smoking related diseases. Since 1991 the prevalence of women smoking in both the 15-19 and 20-24 age groups has increased (25-29% and 35-38%, respectively), thus reversing a decreasing trend that was evident from 1981-90 (Smoking Survey on Smoking in Canada, Health Canada, 1994).

Canadian girls and young women aged 15-19, are now smoking more than their male counterparts. It may be that traditional anti-tobacco programs and messages have not addressed the complexities and pressures of women's lives related to issues of inequity, image and identity.

There are also differences in the rates of smoking among groups of women. For instance, higher rates of smoking may occur among women who are unemployed or have less formal education. As well Francophone women and Aboriginal women tend to have higher rates of tobacco use.

Actions:

Progress to Date

An important first step of the Women and Tobacco Initiative has been to encourage and support research intended to increase the knowledge base relating to the smoking behaviours and patterns of Canadian women. Specific research examples include the:

- **Women and Cessation Project** to research and provide information relating to successful programs and strategies to motivate and help women to quit tobacco use. Components of this project include a literature review, an analysis of recent national survey data related to women and cessation and recommendations for the design and delivery of effective tobacco cessation programming for women.
- **Qualitative Study of Gender Differences Among Adolescents in Uptake and Cessation of Smoking** to provide information and recommendations for effective gender-specific tobacco prevention and cessation programs. This project will include a literature review, analysis of existing data on gender differences in adolescent initiation of smoking among university men and women as well as adolescent boys and girls.
- **Caring For The Caregiver** to research and develop a manual for caregivers providing child care to young children in a home environment. The topics addressed will include coping with stress, healthy eating, tobacco cessation, maintaining a smoke-free environment and developing a support network. The manual will help caregivers to become smoke-free and to establish smoke-free home environments.

Next Steps

- **Women and Tobacco:** A workshop to be held in February 1995 will bring together representatives from health organizations, women's organizations, universities, the media, business, governments, the National Strategy to Reduce Tobacco Use and professional associations. The intent of the workshop is to build consensus around priorities for action at the national level.

- **Women and the Media:** Results of project to examine the media's treatment and influence on the use of tobacco by girls and women between 1989 and 1994 will be available in the spring of 1995. The study which includes magazines, newspapers, films and television is being conducted in both French and English.

3. Pre- and Postnatal Tobacco Initiative

Background:

Smoking during and after pregnancy or exposure to second-hand smoke has a profound impact on the health of the fetus and the woman. Known effects to the fetus and the child include: low birth weight, premature birth, congenital defects, placenta previa, ectopic pregnancy, fetal mortality, impaired lung function, allergies and learning problems. If smoking cessation before, during and after pregnancy is successfully attained, then the incidence of these effects may be substantially reduced.

The Pre- and Postnatal Tobacco Initiative is contributing to the birth and development of healthy children by encouraging and supporting research and development intended to reduce the number of pre- and postnatal women and their families who use tobacco.

Actions:

Progress to Date

- The project **Pre- and Postnatal Smoking: A Review of the Literature** provides a comprehensive literature review of such issues as: effects of exposure to environmental tobacco smoke on the fetus, infant and child; trends and prevalence of maternal smoking during pregnancy; psychosocial aspects of smoking during pregnancy; the meaning of smoking during and after pregnancy; postpartum smoking relapse; smoking cessation programs for pregnant women; theoretical bases for smoking cessation interventions during pregnancy.
- The **Prenatal and Postpartum Tobacco Project** will be published in the form of 6 booklets which will provide: an introduction on tobacco use pre- and postnatally; an inventory of existing tobacco cessation programs and resources in community health programs across Canada; information on the effects of tobacco smoke on the fetus, infant and child; information on the findings of the national survey of health programs across the country;

information on the key components of intervention programs and ways to improve smoking cessation programs for pregnant women and their families; and descriptions of selected smoking cessation programs in prenatal and postpartum use.

Next Steps

- An additional project planned for fiscal year 1994-95 is the research and development of: a smoking cessation intervention for pregnant and postpartum women and their families; resources to empower women to establish non-smoking home environments; and a "Community Action Pack" to provide communities across Canada with the information and resources they require to establish effective tobacco cessation programs for pre- and postnatal women and their families.

4. Priority Groups

Background:

The prevalence of smoking among a number of groups remains high despite the decrease in overall smoking rates over the past 20 years in Canada. This component of the strategy will be aimed at groups who have been less responsive to previous efforts. These groups are distinguished, for example, by age (i.e. youth), ethnicity and culture, income, literacy and addiction levels.

Actions:

The goal of this program is to provide prevention and cessation programs to priority groups. A number of activities involving research, program development and message promotion are being developed as part of the TDRS. A literature review has been completed to synthesize knowledge of groups with high prevalence or limited access to prevention and cessation programs. Fact sheets to summarize the issue of tobacco use among various priority populations will be used to disseminate the information to health professionals.

Youth

Teen Cessation Quit 4 Life (Q4L), a teen self help cessation program, is available through a 1-800 line to youth 15-19 years of age who are motivated to quit. The kit is being promoted through the Lung Association and through print and television media. A recent evaluation with teens using the Q4L kit over a four to six month period indicated that 97% of respondents changed their smoking behaviour, including a 24% quit rate and another 44% who quit temporarily. Approximately 50,000 kits have been distributed to date.

A Q4L Facilitator's Guide has been produced for use in teen group support programs. This Guide provides background information on tobacco use in a discussion/activity format for peer leaders, teachers, health professionals or community leaders who are helping teens quit smoking. The Guide will be evaluated to determine its adaptability in diverse settings, prior to national distribution in the fall of 1995.

At risk youth Information is being collected about peer helper programs for youth at risk for various health issues. The particular focus is on identifying those features or characteristics of peer helper programs that contribute to or challenge their success. Consultations have been held with over 150 groups including those affiliated with health, education, social services and criminal justice, and with youth themselves. This information will be shared with youth-serving agencies and professionals throughout Canada, either currently offering such programs or planning to develop them.

Behavioural Research An analysis of the motivation, behaviours, influencers and role of tobacco use in the lives of young people will increase the understanding of reasons why youth begin to smoke, continue or quit smoking and why some youth are resistant to smoking. This research will guide the development of suitable tobacco prevention and cessation programs.

Aboriginal

Child-to-Child In order to address the prevention needs of Aboriginal youth, a Child-to-Child program is being introduced to children 9-12 years of age through the National Association of Friendship Centres (NAFC). Child-to-Child is a community development approach that is child directed. The program supports children and youth in identifying, researching and addressing health issues, such as tobacco use, through activities that involve the wider community. The process involves evaluation, reflection and defining new goals and directions.

- Five sites have been identified by the NAFC – Halifax, Senneterre, Yellowknife, Vancouver and Winnipeg and project teams (one project leader and one on-site evaluator) have been established.
- Training in the methodology has been carried out in each site. Components of the program include: group work and non-competitive games; the relationship between behaviours and feelings; brainstorming issues; basic research methods; methods of communicating health messages; and evaluation.
- An evaluation training workshop will provide an opportunity for the project teams from each site to provide input into an evaluation framework which will incorporate both western and Indigenous methods of assessing program effectiveness.

- Implementation plans have been established for each site and project work will begin in January 1995.

Inventory of Prevention and Cessation Programs An inventory of programs in Canada and the United States aimed at preventing and reducing the non-traditional use of tobacco among Aboriginal people has been prepared. Based on the findings, a discussion paper will identify needs and appropriate strategies for targeted programs. This project will provide baseline data and identify key programs and approaches for preventing and/or reducing non-traditional tobacco use amongst Aboriginal people.

Francophones

Smoking rates among Francophone Canadians, particularly women and youth, are higher than for the population in general. A number of initiatives under the TDRS will address the needs of Francophone Canadians for culturally appropriate tobacco prevention, protection and cessation programs. In addition, an in-depth needs assessment and analysis of current knowledge, programs and resources available to Francophones is being undertaken.

Ethnic and New Immigrant Groups

These groups are included among the priority groups primarily because of limited access to culturally appropriate programs and services. An in-depth examination of the tobacco related knowledge, attitudes, and behaviours of Arabic, Chinese, Italian, Polish and Portuguese immigrants is in development. Information from this study will be used to develop culturally appropriate and effective tobacco prevention and cessation programs. Consultations are being held with key informants from immigrant serving agencies and health professionals working with multi-cultural groups to identify strategies and approaches to reach this population. A national workshop, to be held in March 1995 with the key informants, will put forward recommendations for developing and delivering tobacco programs.

Heavily Addicted

Behavioral research on heavily addicted smokers (i.e. those who smoke more than 26 cigarettes daily) is currently underway. The research will investigate and identify the factors affecting heavily addicted smokers' decision to quit smoking, including the reasons heavily addicted smokers continue to smoke; what factors would contribute to the decision to quit; what issues would they need to resolve before attempting to quit. The results of the study, to be released in April 1995, will be used to identify strategies that will assist heavily addicted smokers to try to quit.

Low Literacy Groups

Research is being undertaken to identify the smoking behaviours and needs for practical resources of low literacy groups. Results of the research will be used to develop tobacco protection, prevention and reduction resources targeted at this group. A research protocol is being developed to examine the impact of smoking on the material well-being of low-income families.

Mechanisms to Reach Priority Group

Understanding the needs of priority groups and developing approaches to addressing these needs is one step in the process of reducing exposure to, and use of tobacco smoke. Ensuring that mechanisms exist for implementing and promoting these programs is another important part of the process. To this end programs that reach priority groups in various settings and through different means are being explored.

- **Workplace** An analysis of existing data on health promotion in the workplace will provide a picture of employee needs and attitudes with respect to tobacco protection and cessation programs, and help to identify effective and appropriate ways to implement and deliver tobacco cessation programs in various workplace settings and to various groups of employers/ employees.
- **Physicians** A national survey of physicians is being conducted to determine physician counselling practices around tobacco protection, prevention and cessation. Information from the survey will be used to develop strategies for implementing, facilitating and improving physician assisted programs.

5. Environmental Tobacco Smoke and Family Resources

Background:

Environmental tobacco smoke (ETS) refers to the exposure of non-smokers to tobacco smoke. It is estimated that at least 330 Canadians die each year from lung cancer as a result of involuntary exposure to tobacco smoke. ETS increases a child's risk of developing bronchitis, pneumonia and ear infections, and increases the symptoms of children with asthma. Evidence also suggests that infants of women who smoke are at higher risk of SIDS (Sudden Infant Death Syndrome).

The goal for the ETS program is to reduce the proportion of Canadians exposed to ETS in homes, workplaces and other public places.

Actions:

Survey of Knowledge, Attitudes and Practices Concerning ETS Parents of young children, extended family members having regular contact with children under thirteen years of age and children themselves will be the subjects of a national survey of attitudes and practices related to environmental tobacco smoke. Three thousand adults will be surveyed through a telephone questionnaire to capture information representative of various regions and sub-groups in Canada and to include both smoking and non-smoking households. Children aged 8-12 will be interviewed through a series of 20 focus groups across seven sites: Ottawa, Halifax, Montreal, Toronto, Winnipeg, Calgary and Vancouver.

Child care providers will be surveyed also to assess current knowledge and practices among that population in both licensed and unlicensed day care settings. Over three thousand early childhood educators, relatives, neighbours, live-in nannies and other care providers will be surveyed through a telephone questionnaire and five focus groups in Vancouver, Winnipeg, Ottawa, Quebec and Moncton.

Results from the surveys, to be released in April 1995, will provide information to develop policies and programs to raise awareness about and reduce exposure to ETS, particularly among children. Information will be disseminated to health professionals working in the area of tobacco control with the goal of increasing their general knowledge base with respect to ETS and effect ways of reducing exposure.

Survey of Smoking Policies The nature and extent of current restrictions on smoking is being explored in various settings including schools, health care facilities, daycares and nursery schools and retail/commercial businesses (such as shopping malls). Over eleven thousand institutions will be surveyed by mail to examine the nature of the policies including a general description of the policies, how and why policies were developed, the types of restrictions offered, who is affected by the policies, what types of enforcement mechanisms exist and, the nature of enforcements.

Results from this study, to be available in April 1995, will provide baseline information on various restrictions in different settings and identify effective means for reducing exposure to environmental tobacco smoke.

Workshop An ETS workshop will be held in March 1995 to increase awareness of ETS as a health issue and stimulate action among non-traditional organizations such as the hospitality sector, labour organizations, insurance agencies, and environmental health groups. The information provided through this workshop is designed to create awareness of the health risk posed to workers through ETS exposure.

6. Community Action Initiatives

Background:

Community action enables Canadians to take an active role in identifying and responding to tobacco issues at the local level. The Community Action Initiatives Program will mobilize voluntary action across Canada to help reduce the harm associated with the use of tobacco to individuals, families and communities.

The Program will provide time-limited financial support to non-profit organizations and community groups for prevention, cessation and protection activities responding to the needs of at-risk populations including Aboriginals, children and youth, women and hard to reach populations. Funding priorities reflecting specific regional and national needs are established in consultation with provincial and territorial governments, community groups, non-government organizations and other key stakeholders.

Actions:

Progress to Date

- Discussions have been completed with most provincial and territorial officials as well as non-government organizations about their involvement in program delivery.
- Project solicitation from community groups and voluntary organizations have occurred or are currently underway by Health Canada offices across the country.

Next Steps

- Health Canada offices across the country will continue to solicit proposals from community groups and voluntary organizations and monitor the progress of approved projects.

Message Promotion

Public Awareness and Information Campaign

Health Canada's public awareness and information campaign is one component of the TDRS. This campaign will help create an environment that supports measures against tobacco use.

To ensure the media campaign is effective and consistent with other efforts across the country, Health Canada has worked closely with representatives from the provinces, territories and non-government organizations including the Canadian Cancer Society, the Lung Association, the Heart and Stroke Foundation, the Non-Smokers' Rights Association, and the Canadian Council on Smoking and Health.

Extensive market research was conducted at various stages to determine what messages, issues and approaches were relevant to target groups across the country. In addition, Health Canada reviewed evaluations of other campaigns and determined that mass media advertising was key to the success of anti-tobacco campaigns launched by health departments worldwide.

The public awareness and information campaign strategy also involves pooling resources with provinces and territories, to develop projects that will address individual regional needs, including issues not specifically addressed by the Health Canada campaign.

For the Aboriginal component of the campaign, partnerships will be actively sought to develop/modify current products or programs for Aboriginal people. Target audiences and messages will be the subject of in-depth research and testing before implementation.

Television and print ads are only one component of the overall public awareness and information campaign. Public and private sector partnerships will extend the campaign's reach through programs, promotions, event marketing, public relations, and paid media advertising.

Where There's Smoke, originally developed and published as a children's story in English and French, deals with second hand smoke in a non-threatening fashion and is intended to prompt discussion between parents and young children. Opportunities are being explored to make this resource available in electronic formats for access on computers and networks such as Schoolnet.

Dudley the Dragon, a popular bilingual TV series, is targeted at children in grades 1 to 6. An episode of this series has been developed to address environmental tobacco smoke for young parents and children.

The recently completed contests on *MuchMusic* and *MusiquePlus*, which invited teenagers to develop their own anti-smoking advertisements through a promotion that included the *Ingénue* and *Filles d'aujourd'hui* publications, generated nearly 1,000 entries.

As well, Health Canada will collaborate with CBC in the new TV series, "*Liberty Street*," which premieres in January, to incorporate positive anti-smoking themes into the script.

The Heart Health Challenge Television Special which aired in the fall explored the risk factors which may increase the chance of heart disease. As part of this project, a video for adults in which health specialists guide smokers through the steps of cessation is being developed and will be available through a 1-800 number.

Health Canada has worked with *M'aimes-tu*, a popular Quebec TV series to produce an entire episode devoted to the issue of tobacco use, airing in October 1994 and April 1995.

Le club de 100 watts, is a Quebec TV series aimed at youth between the ages of 8 and 12. Five episodes of the show have been devoted to the tobacco issue, and will include a contest generating anti-smoking ideas from young people.

Also currently being developed are special editorial sections in various publications, which will reach adults, parents, caregivers, and pregnant women.

These are but a few examples of the kinds of other activities that will support the media campaign under the public awareness and information campaign of the Tobacco Demand Reduction Strategy.

Research

1. Overview

In the past, research in tobacco control has examined a range of topics, such as the health effects of tobacco use and the smoking rates of various segments of the population. However, information gaps exist, and there is a need to gain further understanding of the current smoking behaviours and the influencing factors of smoking among various population groups.

To better inform smokers and non-smokers of the hazards associated with tobacco use, Health Canada continues to develop methods for the collection and analysis of many toxic chemicals found in tobacco and tobacco smoke. This information could be communicated to smokers through a number of methods, including the way tar, nicotine and carbon monoxide values are transmitted – on the package.

Research on environmental tobacco smoke (ETS) and its effects on non-smokers, including children, is also being performed. Health Canada is conducting one of the world's largest and most comprehensive studies into the mechanics of the relationship between ETS and lung cancer.

The following research initiatives are designed to provide the data and information needed to develop a comprehensive range of tobacco demand reduction policies and programs.

- The National Population Health Survey
- The General Social Survey
- The Health Promotion Survey
- A survey of health professionals
- A study on tobacco packaging and its impact on consumers
- Toxic constituents and standards
- The Youth Smoking Survey
- An econometric study looking at the impact of the current reduction of tobacco taxes
- Lung cancer and environmental tobacco smoke (ETS)
- An assessment of infants' and children's exposure to ETS
- The impact of maternal smoking and ETS on infants

- An update on the impacts on health that are related to tobacco usage
- An update on mortality rates that are attributable to smoking
- Consensus workshops
- Survey on Smoking in Canada

Actions:

- The Survey on Smoking in Canada is a longitudinal survey consisting of four interviews of a panel of about 15,000 Canadians age 15 or over, on a quarterly basis throughout 1994-95. The results for the first two cycles of the survey have been released and have provided valuable up-to-date information concerning the smoking behaviour of Canadians.
- The first cycle of the National Population Health Survey, which is a national longitudinal survey of approximately 22,000 Canadians, is being carried out throughout 1994-95. This study examines why people start to smoke, why they continue smoking and why others do not smoke.
- The General Social Survey is a national survey of approximately 12,000 Canadians with a focus on the family. An expanded section on tobacco use determines the number of people in households who smoke, whether or not individuals believe and understand the health effects from ETS, and what measures, if any, individuals take in their households to minimize the exposure to ETS.
- The third cycle of the Health Promotion Survey includes an expanded section on tobacco. The questions focus on stages of change for health behaviours and determine the proportion of Canadians who want to quit and what support they need.
- A survey of health professionals determines the smoking status of physicians, the proportion attending professional training sessions of smoking cessation, and their counselling practices on cessation and the health effects of ETS.
- To examine the constituents of tobacco products and tobacco smoke and to develop standards in order to further increase tobacco control measures, there will be a laboratory determination of:

changes in concentrations of nicotine, additives, heavy metals, pesticides and constituents of smoke from harvested tobacco to consumption – the present status and historical trends will also be evaluated; and

toxic constituents of smoke and the development of standard methods for analysis in order to provide more information on packages to discourage smoking.

- The Youth Smoking Survey, that is being conducted by Statistics Canada, is in progress. Data collection was completed in December. A very high percentage of the schools contacted, nearly 98 per cent, permitted their students to participate in the survey.
- Initial reports from interviewers and participants have been positive. Health Canada anticipates to release data in the fall of 1995.
- Preparations are being made to conduct a major Canada-wide study which will investigate the relationship between exposure to passive smoking and lung cancer in non-smokers. The study will also take into account the effects of other risk factors for lung cancer in non-smokers, including occupational history, exposure to radon, and diet. An international Steering Committee has been formed to provide guidance for the study. Discussions are underway with provincial cancer registries regarding their collaboration in the study. In Quebec, a collaborative arrangement has been made with the Hôtel-Dieu Hospital and Institut Armand Frappier.
- Preparations are underway to conduct a series of consensus workshops on issues related to tobacco control. The purpose of such workshops is to strive for consensus and develop recommendations for action on issues which have previously been controversial or unclear. An initial planning workshop was held in November, involving a number of experts in a variety of tobacco-related areas. Broader consultations will follow.
- A national perinatal surveillance system is being established to study and monitor the effects of maternal smoking and other determinants on birth outcome and health in early infancy. The information which results from this system will help to evaluate which types of interventions are most suitable and effective. A national Steering Committee, comprised of representatives from a number of health-related associations and organizations, has been formed to provide guidance for the project.

2. Generic Packaging

Background:

On February 8, 1994, the Prime Minister announced that the Standing Committee on Health would be asked to study the issue of generic packaging. In addition, the Minister of Health announced that the Department would look into generic packaging as an additional measure to control tobacco products. Health Canada has developed a Study Framework in consultation with the provinces and territories, which will examine the purpose of tobacco packaging (including generic packaging) and its impact on consumers from a marketing perspective.

Actions:

Progress to Date

- A federal/Provincial/Territorial Working Group has been established and has finalized the Study Framework.
- An Expert Panel comprised of experts in the field of marketing research, marketing to youth, consumer behaviour and package design is overseeing final studies currently being conducted. Recommendations will be available in March 1995.
- On November 18, Health Canada tabled a Response to the June 1994 Report of the Standing Committee on Health – Toward Zero Consumption Generic Packaging of Tobacco Products. The Government agrees with the Standing Committee's majority conclusion that generic packaging could be a reasonable step in a comprehensive strategy to reduce tobacco consumption. A number of factors must be addressed, however, before any future changes to tobacco packaging can be considered, including the likely effectiveness of such measures and their impact on Canada's international trade obligations, contraband and the viability of collateral industries.

International Programs

Canada continues to be recognized as a country of distinction in research on the health consequences and the prevalence of smoking. Canadian laws, policies and health promotion programs are seen as a model by other countries. Health Canada's international programs are designed to support and reinforce Canada's domestic tobacco control activities through initiatives in several areas.

- Health Canada, in partnership with the International Development Research Centre, will provide support to one or two countries in the field of research on tobacco consumption and production. This research is designed to stimulate countries to develop legislation and regulations restricting tobacco sales. The program will maintain and expand cooperative initiatives with countries, such as the United States, who already have prominent anti-tobacco programs.
- The Minister of Health and the U.S. Secretary of Health and Human Services agreed at a meeting on September 29, 1994 to join forces to strengthen the international effort against smoking. Canada and the United States will strive to develop research surveillance and other joint initiatives.
- Canadian experts will continue to provide program assistance to target countries. The World Health Organization will act as project coordinator and as the vehicle for sharing information on tobacco demand reduction with other countries.
- Through two international research programs, Health Canada will gather information on the international tobacco market concerning the relationship between tobacco consumption, income levels and expenditure on tobacco products, and the relationship between Canadian and international tobacco manufacturers.
- Significant support was received for the generic packaging initiative through resolutions passed at the 9th World Conference on Tobacco and Health, held in Paris in October 1994.





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